CITY OF CARLSBAD - ENGINEERING DEPARTMENT APPLICATION FOR GRADING PERMIT

PERMIT NUMBER:

PROJECT NAME:				PROJECT N			
PROJECT LOCATION:				DRAWING I	NUMBER:		
ASSESSOR PARCEL NUMBER	(S):						
PROJECT DESCRIPTION:							
OWNER:							
ADDRESS:							SUITE:
·					Z	_	
PHONE NUMBER:							
I CERTIFY THAT I AM THE LEWITH THIS PERMIT.					RADING ASS	OCIATED	1
OWNER SIGNATURE:						DATE:	
CIVIL ENGINEER:							
ADDRESS:							SUITE:
CITY:				STATE:	Z	ZIP:	
PHONE NUMBER:				NUMBER:			
SOILS ENGINEER:							
ADDRESS:							SUITE:
CITY:				STATE:	Z	ZIP:	
PHONE NUMBER:			FAX	NUMBER:			
GRADING CONTRACTOR:				STATE LICE	ENSE NO.:		
GRADING CONTRACTOR:			CITY	STATE LICE BUSINESS LICENS		_	
GRADING CONTRACTOR: ADDRESS:			CITY				SUITE:
			CITY		E NO	ZIP:	SUITE:
ADDRESS:				/ BUSINESS LICENS	E NO		SUITE:
ADDRESS: CITY:	cut	су	FAX	/ BUSINESS LICENS	E NO	•	SUITE:
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ADDRESS: CITY: PHONE NUMBER: GRADING QUANTITIES:	remedial	cy NPDES REQU	FAX fill export UIREMENTS:	STATE: NUMBER: cy cy	E NO	•	SUITE:
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ADDRESS: CITY: PHONE NUMBER: GRADING QUANTITIES: QUALIFIED CONTACT PERSO PHONE NUMBER: BASIS OF PERMIT FEES:	nemedial	nPDES REQUESTION APPLICATION A	FAX fill export UIREMENTS: cy d information and policies re and any amen	STATE: STATE: NUMBER: CY CY TOTAL PERMIT FI BALANCE DUE: In provided is corrected in provided in provided in provided is corrected in provided in provided in provided in provided in provided is corrected in provided in	import EES: t. I agree to complete and grading is will also complete.	\$ comply w including ly with O:	vith , but not SHA
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